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Recipient Committee Type or print in ink. Campaign Statement — Short Form	Statement covers period  from IDN / 1991	Date Stamp	ALEORNIA 450
EE INSTRUCTIONS ON REVERSE	through - June 30, 1994		Page of
for use by recipient committees which have not received a contribution or other receipt which must be itemized, have not received or made loans, and have no outstanding accrued expenses or enforceable promises received.	Date of election if applicable:  (Month, Day, Year)		For Official Use Only
heck one of the following boxes to indicate the type of statement being filed:			
	pplemental Pre-election Statement (Atta rmination Statement (Attach a complete	•	•
Committee Information			
NAME OF COMMITTEE  Committee To Recall DAVERDORT  ADDRESS OF COMMITTEE (NO. AND STREET)  LILL W. TOKAY ST. Sat. A  CITY STATE ZIP CODE  AREA CODE/PHONE NUMBER  NONE	NAME OF TREASURER  TAOMAS J. N  PERMANENT ADDRESS OF TREA  CITY  LOCU  AREA CODE/DAYTIME PHONE N  209-367-67)	75.	STATE ZIP CODE
I Committee Type (check boxes) Is this a controlled committee? Yes No	Is this a sponsored committee?  Ye	No Is this a broad	based committee? Yes No
This committee has not received any contributions, cumulative contribution be itemized, and this committee has not made or received loans, and has not law used all reasonable diligence in preparing this statement. I have revisere in it is true and complete. I certify under penalty of perjury under the law Executed on Total Park At Local Collins and Controls a condition and to the best of my knowledge the treasurer has used all reason the best of my knowledge the information contained herein is true and controls that the foregoing is true and correct.	ewed the statement and to the bear of the State of California That By By By mmittee must also verify the can lable diligence in preparing this	ng enforceable promises of my knowledge the foregoing is true a signature of 1 signature of 1 statement. The statement is the province of 1 statement is a statement in the province of the p	es received.  the information contained and correct.  IREASURER  ave used all reasonable ewed the statement and to
Executed on At	By	ATURE OF OTHER PROPERTY.	AT DESCRIPTION OF STREET
Executed on At	By	·	ATE, PROPONENT, OR RESPONSIBLE OFFICER
			the contract of the contract o

FOR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT.

CITY AND STATE

Executed on \_\_

SIGNATURE OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

## Recipient Committee Campaign Disclosure Statement Summary Page

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period

Summary rage	through Turio 3094	Page of
NAME OF COMMITTEE		I.D. NUMBER
Committee to Record! Descention		930573
Expenditures Made V		
1. Expenditures of \$100 or more made this period		\$
2. Expenditures under \$100 (Not itemized.)		
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD	Add Lines 1 + 2	s
4. Total expenditures made from previous statement		
5. TOTAL EXPENDITURES MADE TO DATE	Add Lines 3 + 4	\$ 13,136
Contributions Received		. 0
6. Monetary contributions received this period		\$
7. Non-monetary contributions received this period		17 000
8. Total contributions received from previous statement		~
9. TOTAL CONTRIBUTIONS RECEIVED TO DATE	Add Lines 6 + 7 + 8	s 17,03/
Current Cash Statement		2./
10. Beginning cash balance	Previous Summary Page, Line 14	\$ 101
11. Cash receipts this period	Line 6 above	0
12. Miscellaneous increases to cash		
13. Cash expenditures this period	Line 3 above	
14. ENDING CASH BALANCE THIS PERIOD	+ 11 + 12, then subtract Line 13	s